

**Interim Designation of Agent to Receive Notification
of Claimed Infringement**

Full Legal Name of Service Provider: Allegheny College

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): _____

Address of Service Provider: 520 N. Main Street, Meadville, PA 16335

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** Susan Fenton

Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):

Allegheny College, Computing Services, Murray Hall Box 16A
Meadville, PA 16335

Telephone Number of Designated Agent: (814) 332-2755

Facsimile Number of Designated Agent: (814) 333-9699

Email Address of Designated Agent: sfenton@alleg.edu

Signature of Officer or Representative of the Designating Service Provider:

Date: 11-18-98

Typed or Printed Name and Title: Bruce J. Smith
Dean of the College

**Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee
Made Payable to the Register of Copyrights.**

RECEIVED

NOV. 24 1998

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